

Work Order ID 89746



89746

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September-04-12 10:35:56 AM

Item ID: K591-113 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Short Step Instln Kit
 Start Date: 9/04/12 Start Qty: 10.00 ***10*** Cust Item ID:
 Required Date: 10/05/12 Req'd Qty: 10.00 ***10*** Customer:
 Reference:

Approvals: Process Plan: *W* Date: Tooling: Date: Run Start ***NR1***
 QC: Date: SPC (Y/N): Date: Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
DSI9525	A	<i>JB</i>							
104	Pick Kit	0.00							
104									
Packaging	Memo	0.00							<i>10</i> <i>12/09/07 JB</i>
Packaging									
105	QC4- 100% Inspect kits for completeness	0.00							
105	<i>QC4/2005</i>								
QC	Memo	0.00							<i>DAS 1E</i> <i>17/09/10</i> 
Quality Control									
110	Identify as per dwg & Stock Location:	0.00							
110									
Packaging	Memo	0.00							<i>P/16</i> <i>10/12/11</i> <i>10</i>
Packaging	***CHG005***								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

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Page 2

September-04-12 10:35:56 AM

Item ID: K591-113 Accept *N900040100* Setup Start *NS1*
Revision ID: Stop *NS2*
Item Name: Short Step Instln Kit
Start Date: 9/04/12 Start Qty: 10.00 *10* Cust Item ID:
Required Date: 10/05/12 Req'd Qty: 10.00 *10* Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	QC21- Final Inspection - Work Order Release	0.00							
120									
QC	Memo	0.00							
Quality Control									

12/9/12 JG
MF
12-09-11

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Other					
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge						
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

Picklist Print

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Page 1

Work Order ID: 89746

Parent Item: K591-113

Parent Item Name: Short Step Instln Kit

Start Date: 9/04/12

Required Date: 10/05/12

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP: C04.11.09ReformatKJ/JLM IPP Rev:D as per revG DD
10.04.20 verified by:EC IPP Rev:E as per ECN10-586 10.06.18 DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2171 Clamp S H0		Manufactured	No			104	Each	37.0000	20				
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST457		37							
				86193		34			17x 86193				
				86359		3			3x 86359				
D2274 Radius Block S H0		Manufactured	No			104	Each	630.0000	40				
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST008		623							
				86855		312			86855				
				88452		311							
				ST009		7							
				86348		7							
D2182B Rubber Cushion (D2182B035) CUT 2 AT 3.50" S H0		Manufactured	No			104	f	263.7678	0.5833	5.833			
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST410		263.76777							
				63413		1.6							
				66063		41.61817							
				86201		220.5496			86201				
D2362-3 Support Bracket S H0		Manufactured	No			104	Each	12.0000	10				
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST484		12							
				86194		2			2x 86194				
				86653		10			8x 86653				

NCR: Yes / No

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Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
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Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

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Work Order ID: 89746

Parent Item: K591-113

Parent Item Name: Short Step Instln Kit

Start Date: 9/04/12

Required Date: 10/05/12

Start Qty: 10.00

Required Qty: 10.00

D3595-200-300
RUBBER CUSHION

Manufactured No

104 Each 115.5006

10 JB

Location Loc Qty Loc Code

MAT052 37.3336

41360 37.3336

ST415 78.167

76552 29.167

84209 49

84209

AN3-37A
Bolt

Purchased No

104 Each 392.0000

20 JB

Location Loc Qty Loc Code

ST353 392

117619 4

119086 388

119086

AN4-21A
Bolt

Purchased No

104 Each 87.0000

40 JB

Location Loc Qty Loc Code

ST358 50

122416 50

ST359 37

122265 37

3 x 122416

37 x 122265

AN4-22A
Bolt

Purchased No

104 Each 204.0000

10 JB

Location Loc Qty Loc Code

ST358 155

122416 155

ST359 49

116419 49

122416

AN960JD10
Washer

NAS1149D0363J Purchased No

104 Each 0.0000

40 JB 12/09/05

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Shop Packet Print

Page 2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
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Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

September-04-12 10:35:55 AM

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Work Order ID: 89746

Parent Item: K591-113

Parent Item Name: Short Step Instln Kit

Start Date: 9/04/12

Required Date: 10/05/12

Start Qty: 10.00

Required Qty: 10.00

AN960JD416
Washer

NAS1149D0463J

Purchased

No

104 Each 29.0000

60
122441

✓ JB

Location

Loc Qty

Loc Code

ST351

29

116289

8

119097

21

MS21042L3
Nut

Purchased

No

104 Each 2,927.0000

20

✓ JB

Location

Loc Qty

Loc Code

316

751

122452

751

ST300

588

117885

32

119017

418

119075

138

ST317

1588

122141

1588

MS21042L4
Nut

Purchased

No

104 Each 4,250.0000

50

✓ JB 12/09/05

Location

Loc Qty

Loc Code

314

4235

122452

4235

ST300

15

121444

15

122452

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

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Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
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<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

DART SERVICE INSTRUCTION

TO AMEND INSTALLATION INSTRUCTIONS D350-591 REV. G
AND INSTRUCTIONS FOR CONTINUED AIRWORTHINESS ICA-D350-591 REV. 3
REF TCCA STC: SH92-6
REF FAA STC: SH967NE

REFERENCE ONLY

PURPOSE:

TO PROVIDE AN OPTIONAL CUSHION KIT TO BE INSTALLED ON THE D350-591-111A/-113/-115/-117A/-119 *Heli-Access-Step™* (THE D2856-400-720 ABRASION STRIP IS REPLACED WITH THE D3595-200-300 CUSHION).

CHANGE:






FOR D350-591-111A/-113/-115 @ CHG 005 (OR LATER), D350-591-117A @ CHG 003 (OR LATER) AND D350-591-119 @ CHG 004 (OR LATER), THE PARTS LIST OF INSTALLATION INSTRUCTIONS D350-591 AND INSTRUCTIONS FOR CONTINUED AIRWORTHINESS ICA-D350-591 IS AMENDED AS FOLLOWS:

QTY -111A	QTY -113	QTY -115	QTY -117A	QTY -119	Part Number	Description
X					D350-591-111A	Heli-Access-Step™, Long Step – High Skid
	X				D350-591-113	Heli-Access-Step™, Short Step – High Skid
		X			D350-591-115	Heli-Access-Step™, Short Step – Low Skid
			X		D350-591-117A	Heli-Access-Step™, Pre-Flight Step
				X	D350-591-119	Heli-Access-Step™, Long Step – Low Skid
	1				D2310	STEP ASSEMBLY (HIGH-SHORT)
1					D2311	STEP ASSEMBLY (HIGH-LONG)
		1			D2354	STEP ASSEMBLY (LOW-SHORT)
				1	D2355	STEP ASSEMBLY (LOW-LONG)
4	2	2	2	2	D2171	CLAMP
4	2	2	2	2	D2182B035	CUSHION
8	4	4	4	4	D2274	RADIUS BLOCK
			1		D2362-041	SUPPORT BRACKET
2	1			1	D2362-3	SUPPORT BRACKET
		1			D2362-5	SUPPORT BRACKET
2	1	1	1	1	D3595-200-300	CUSHION (NEW)
2	2	2		2	AN3-37A	BOLT
		4			AN4-20A	BOLT (REPLACED, WAS AN4-16A)
8	4		4	4	AN4-21A	BOLT (REPLACED, WAS AN4-20A)
1	1	1	4	1	AN4-22A	BOLT
4	4	4		4	NAS1149D0363J	WASHER (OR AN960JD10)
10	6	2	4	6	NAS1149D0463J	WASHER (OR AN960JD416)
		4			NAS1149D0416J	WASHER (OR AN960JD416L)
2	2	2	2	2	MS21042L3	NUT
9	5	5	4	5	MS21042L4	NUT

CANADA
DEPARTMENT OF TRANSPORT
AIRCRAFT CERTIFICATION
BRANCH
DAO # 01-O-01

APPROVED
BY: 
D. SHEPHERD (DE # 02)

DATE: 10.06.08
CERT. NO.: SH92-6
ISSUE NO.: 11

A	NEW ISSUE.	JPH	10.06.08
REV.	DESCRIPTION	BY	DATE
DESIGN		DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. A
MFG. APPR.	N/A	DSI 9525	SHEET 1 OF 4
APPROVED		TITLE	SCALE
DE APPR.		STEP CUSHION CHANGE	NTS
DATE	10.06.08	<small>COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

REFERENCE ONLY

THE DSI-9525-XXX KITS THAT ARE AVAILABLE FROM DART TO UPGRADE THE D350-591-111A/-113/-115 KITS @ CHG 004 (OR EARLIER), THE D350-591-117A KIT @ CHG 002 (OR EARLIER) AND THE D350-591-119 KIT @ CHG 003 (OR EARLIER) ARE AS FOLLOWS:

QTY -011	QTY -013	QTY -015	QTY -017	Part Number	Description
X				DSI-9525-011	STEP CUSHION KIT (FOR D350-591-111A)
	X			DSI-9525-013	STEP CUSHION KIT (FOR D350-591-113/-119)
		X		DSI-9525-015	STEP CUSHION KIT (FOR D350-591-115)
			X	DSI-9525-017	STEP CUSHION KIT (FOR D350-591-117A)
2	1	1	1	D3595-200-300	CUSHION
		4		AN4-20A	BOLT
8	4			AN4-21A	BOLT
			4	AN4-22A	BOLT
8	4	4	4	NAS1149D0463J	WASHER (OR AN960JD416)
8	4	4	4	MS21042L4	NUT

INSTRUCTIONS:


TO INSTALL THE D3595-200-300 CUSHION:






1. REMOVE THE STEP PER ICA-D350-591 SECTION 32.2
2. REMOVE THE D2856-400-720 ABRASION STRIP PER ICA-D350-591 SECTION 32.4
3. POSITION THE D3595-200-300 CUSHION AS INDICATED ON SHEET 3 OR 4 (AS APPLICABLE) OF THIS SERVICE INSTRUCTION.
4. REINSTALL THE STEP PER ICA-D350-591 SECTION 32.1 AS APPLICABLE USING THE NEW HARDWARE PROVIDED AS SHOWN ON SHEET 3 OR 4 (AS APPLICABLE) OF THIS SERVICE INSTRUCTION.

WEIGHT AND BALANCE:

THERE IS A NEGLIGIBLE WEIGHT INCREASE WITH THIS MODIFICATION.

CANADA
DEPARTMENT OF TRANSPORT
AIRCRAFT CERTIFICATION
BRANCH
DAO # 01-O-01

APPROVED
BY: 
D. SHEPHERD (DE # 02)
DATE: 10.06.08
CERT. NO.: SH92-6
ISSUE NO.: 11

DESIGN		DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. A
MFG. APPR.	N/A	DSI 9525	SHEET 2 OF 4
APPROVED		TITLE	SCALE
DE APPR.		STEP CUSHION CHANGE	NTS
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